PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

601-1721

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN										
			(Column 1)		(Column 2)			TYPE		OR											
TOTAL CLAIMS			25					RATE	FEE]	RATE	FEE									
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00									
TOTAL CHARGEABLE CLAIMS			25minus 20=		*	5		X\$ 9=	45	OR	X\$18=										
INDEPENDENT CLAIMS			2 m	ninus 3 =	*	9		X42=		OR	X84=										
MULTIPLE DEPENDENT CLAIM P			RESENT					+140=		OR	+280=										
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL		OR	.TOTAL										
	С	LAIMS AS A	D - PAR	T II						OTHER											
· (Column 1)				(Colu		(Column 3)		SMALL	ENTITY	OR	SMALL	, 									
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=										
	Independent	*	Minus	***		-	Н	X42=		OR	X84=										
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=										
BEST AVAILABLE COPY								TOTAL			TOTAL										
(Column 1) (Column 2) (Column 3)							. '	ADDIT. FEE		1	ADDIT. FEE										
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
	Total	*	Minus	**		=		X\$ 9=	;	OR	X\$18=										
	Independent	*	Minus	***	T OI AIL	=		X42=		OR	X84=										
<u>L</u>	FIRST PRESE	NTATION OF M	JLIIPLE DE	PENDEN	CLAIM		ן י	_+140=		OR	+280=										
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE										
		(Column 1)			mn 2)	(Column 3)															
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE									
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=										
	Independent	*	Minus	***	T. C	=		X42=		OR	X84=										
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	TCLAIM		!	+140=		OR	+280=	· · ·									
	If the entry in colu	. L	TOTAL		OB	TOTAL															
	If the "Highest Nu	ımber Previously P	aid For" IN Th	HIS SPACE	is less that	an 3, enter "3."	,	_	propriate box	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											